

January 20, 2006

Via EFS-Web (Beta)

Mail Stop AMENDMENT
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450, or being transmitted via facsimile or EFS-Web (Beta) to the USPTO on the date indicated below.

Date: January 20, 2006


Pamela S. Newton

Re: Patent Application for:
"SERVICE PARAMETER INTERWORKING METHOD"
Serial No. 09/640,674
Attorney Docket No. P11148-US1

Dear Sir:

Enclosed for filing please find the following items relating to the above-identified application:

- (1) Petition for Extension of Time (1 page);
- (2) Amendment Transmittal Letter (1 page); and
- (3) Amendment (11 pages).

The commissioner is hereby authorized to charge the \$120.00 extension fee and any additional fees associated with this communication or credit any overpayment to Deposit Account No. 50-1379.

Should you have any questions or comments concerning this matter, please feel free to contact the undersigned at 972/583-1572.

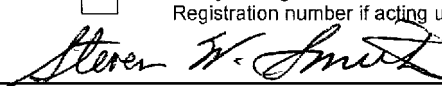
Sincerely,



Steven W. Smith
Reg. No. 36,684

SWS/psn

Under the paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		Docket Number (Optional) P11148-US1	
Application Number 09/640,674		Filed August 18, 2000	
For SERVICE PARAMETER INTERWORKING METHOD			
Art Unit 2663		Examiner Ferris, Derrick W	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
	<u>Fee</u>	<u>Small Entity Fee</u>	
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ <u>120.00</u>
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ _____
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ _____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$ _____
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>50-1379</u> . I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>36,684</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____			
 _____ Signature		<u>1-20-2006</u> _____ Date	
<u>Steven W. Smith</u> _____ Typed or printed name		<u>972-583-1572</u> _____ Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. <input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.			

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. P11148-US1	
Applicant(s): Frank Hundscheidt, et al.					

Application No. 09/640,674	Filing Date August 18, 2000	Examiner Ferris, Derrick W	Customer No. 27045	Group Art Unit 2663	Confirmation No. 6777
--------------------------------------	---------------------------------------	--------------------------------------	------------------------------	-------------------------------	---------------------------------

Invention: **SERVICE PARAMETER INTERWORKING METHOD**

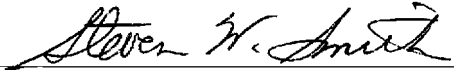
COMMISSIONER FOR PATENTS:

Transmitted herewith is an amendment in the above-identified application.
The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	14 -	28 =	0 x	\$50.00	\$0.00
INDEP. CLAIMS	8 -	12 =	0 x	\$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00

☒ No additional fee is required for amendment.
☐ Please charge Deposit Account No. 50-1379 in the amount of **\$0.00**
☐ A check in the amount of _____ to cover the filing fee is enclosed.
☒ The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 50-1379

☒ Any additional filing fees required under 37 C.F.R. 1.16.
☒ Any patent application processing fees under 37 CFR 1.17.

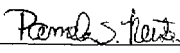


 Signature

Dated: **1-20-2006**

Steven W. Smith
Reg No. 36,684
 Ericsson Inc.
 6300 Legacy Drive, M/S EVR 1-C-11
 Plano, TX 75024

CC:

CERTIFICATE OF MAILING OR TRANSMISSION	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450, or being facsimile transmitted, or transmitted via EFS-Web (Beta) to the USPTO on the date indicated below.	
 _____ Signature	
Pamela S. Newton	January 20, 2006
Depositor's Name and Date	